## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET

(FOR USE WITH FORM PTO-875)

FILING DATE 526264

	AS FILED		AFTER 1 AMENDMENT		AFTER 2 ** AMENDMENT				AS F	ILED		FER NDMENT	AFTER 2 ** AMENDMEN	
	IND.	DEP.	IND.	DEP.	IND.	DEP.			IND.	DEP.	IND.	DEP.	IND.	DEP.
1								51						
2				-				52 53						
3								54						
5								55						
6								56						
7				-				57 58						
9								59						
10								60						
11								61						
12	_			$\dashv$				62 63						
13 14								64						
15								65						
16								66						
17								67 68						
18 19								69						
20								70						
21								71						
22_								72						
23		ļ						73 74			•			
25		<b></b>	$\top$					75						
26								76						
27								77						
28				-+				78 79						
29 30		l						80			-			
31_								81						
32								82						
33						-		83 84						-
34 35								85						
36								86						
37								87						<u> </u>
38								88 89						
39 40								90						<del></del>
41								91						
42								92						<u> </u>
43								93 94						ļ <u> </u>
44 45								95				<b></b>		
46								96						
47								97				ļ		
48								98 99					•	
49_ 50_		-						100						
TOTAL			2	1				TOTAL						
IND.		•	2	▼		•	4	IND.						」 <b>▼</b>
TOTAL DEP.		<b>←</b>	25	<b>(-</b>		<b>(</b>		TOTAL DEP.		<b>4</b>		+		•
TOTAL CLAIMS			28					TOTAL CLAIMS						
										U.S. DEPAR	RTMENT of	COMMERCE		